

Commonwealth of Massachusetts
Division of Fisheries and Wildlife
Attn: Tom French
1 Rabbit Hill Road
Westborough, MA 01581

APPLICATION FOR SCIENTIFIC COLLECTION PERMIT
(For Research and/or Education)

The Permit Application is for the Scientific Collection of:

☐ Mammals
☐ Birds
☐ Reptiles and Amphibians
☐ Fish
☐ Invertebrates
☐ Plants
☐ Salvage

PROVIDE ATTACHMENTS IF EXTRA SPACE IS NEEDED

NAME _____ AGE _____

HOME ADDRESS _____

HOME PHONE (____) _____

BUSINESS ADDRESS _____

BUSINESS PHONE (____) _____

ARE YOU A STUDENT? _____ SCHOOL _____

GRADUATE _____ UNDERGRADUATE _____

IF THIS APPLICATION IS FOR BIRDS,
DO YOU HAVE A MIGRATORY BIRD PERMIT? _____ IF YES, GIVE PERMIT # _____

STATE AS SPECIFICALLY AS POSSIBLE, THE NUMBER AND SPECIES OF ANIMALS OR PLANTS TO
BE COLLECTED AND/OR POSSESSED _____

STATE REASON FOR COLLECTION AND/OR POSSESSION _____

PUBLIC, SCIENTIFIC OR EDUCATION INSTITUTION TO WHICH COLLECTED SPECIMEN
WILL BE DONATED_____

STATE WHERE COLLECTIONS WILL BE MADE_____

DESCRIBE METHODS OF COLLECTION_____

NAME(S) OF ANY SUBPERMITTEE(S) _____

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Please recheck to assure that all questions have been answered completely.

*** FAILURE TO FOLLOW DIRECTIONS WILL SLOW OR
DELAY PROCESSING OF THIS APPLICATION.**

I certify that the information provided above is true and correct to the best of my knowledge and belief.

Date

Signature of Applicant

Department Head or Sponsoring Faculty Member
(required if applicant is a student)